

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
<b>FEES DETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>			
<b>FORMALITY REVIEW</b>	<i>SP</i>	<i>JC 902</i>	<i>03-12-01</i>
<b>RESPONSE FORMALITY REVIEW</b>			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date		
Final	Original	8	5
1	1	1	1
2	2	2	2
3	3	3	3
4	4	4	4
5	5	5	5
6	6	6	6
7	7	7	7
8	8	8	8
9	9	9	9
10	10	10	10
11	11	11	11
12	12	12	12
13	13	13	13
14	14	14	14
15	15	15	15
16	16	16	16
17	17	N	N
18	18		
19	19		
20	20		
21	21		
22	22		
23	23	✓	✓
24	24	✓	✓
25	25	✓	✓
26	26	✓	✓
27	27	✓	✓
28	28	✓	✓
29	29	✓	✓
30	30	✓	✓
31	31	✓	✓
32	32	✓	✓
33	33	✓	✓
34	34	✓	✓
35	35	✓	✓
36	36	✓	✓
37	37	✓	✓
38	38	✓	✓
39	39	✓	✓
40	40	✓	✓
41	41	N	N
42	42		
43	43		
44	44		
45	45		
46	46		
47	47		
48	48		
49	49		
50	50	✓	✓

Claim	Date		
Final	Original	3	5
51	51	5	9
52	52	5	9
53	53		
54	54		
55	55		
56	56		
57	57		
58	58		
59	59		
60	60	✓	✓
61	61		
62	62		
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100	100		

Claim	Date		
Final	Original		
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If more than 150 claims or 10 actions  
staple additional sheet here

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